FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)								
	Stried, Christopher, , , / Swain, Susan, , ,								
	(b) Address (number and street) ☐ Check if address changed 1031 Valley Avenue					Candidate's FEC Identification Number P00009084			
	(c) City, State, and ZIP Code					3. Is This No		ended	
	Marco Island FL 34145				5	Statement (N) OR X (A)		
4.	Party Affiliation	5. Office Soug	ght		6. State & Distr	rict of Candidate			
	INDEPENDENT	President	ial			00			
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE									
7.	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 (year of election)								
	NOTE: This designation should be filed with the appropriate office listed in the instructions.								
(a) Name of Committee (in full) FULL STRIED AHEAD									
	(b) Address (number and street) 1031 VALLEY AVENUE								
	(c) City, State, and ZIP Code								
	MARCO ISLAND				FL	34145			
(Including Joint Fundraising Representatives) 8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee.									
	(a) Name of Committee (in full)								
(b) Address (number and street)									
	(c) City, State, and ZIP Code								
		mined this Sta	tement and to	the best of	my knowledge a	nd belief it is true, correct	and complete.		
	gnature of Candidate					Date		•	
St	ried, Christopher, , ,	[Electronically Filed]				12/27/2022			
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.									

FEC FORM 2 (REV. 02/2009)